

MDAH/Statewide Oral History P. O. Box 571

h t homes, Director

AGENCY	ADDRESS		CHIEF EXECUTIVE OFFICER		
	Actual Expenses FY Ending June 30, 2014	Estimate Expenses FY Ending June 30, 2015	Requested for FY Ending June 30, 2016	Requested Increase (+) or Decrease (-) FY 2016 vs. FY 2015 (Col. 3 vs. Col. 2)	
				AMOUNT	PERCENT
I. A. PERSONAL SERVICES					
1. Salaries, Wages & Fringe Benefits (Base)					
a. Additional Compensation					
b. Proposed Vacancy Rate (Dollar Amount)					
c. Per Diem					
Total Salaries, Wages & Fringe Benefits					
2. Travel					
a. Travel & Subsistence (In-State)					
b. Travel & Subsistence (Out-of-State)					
c. Travel & Subsistence (Out-of-Country)					
Total Travel					
B. CONTRACTUAL SERVICES (Schedule B):					
a. Tuition, Rewards & Awards					
b. Communications, Transportation & Utilities					
c. Public Information					
d. Rents					
e. Repairs & Service					
f. Fees, Professional & Other Services					
g. Other Contractual Services					
h. Data Processing					
i. Other					
Total Contractual Services					
C. COMMODITIES (Schedule C):					
a. Maintenance & Construction Materials & Supplies					
b. Printing & Office Supplies & Materials					
c. Equipment, Repair Parts, Supplies & Accessories					
d. Professional & Scientific Supplies & Materials					
e. Other Supplies & Materials					
Total Commodities					
D. CAPITAL OUTLAY:					
1. Total Other Than Equipment (Schedule D-1)					
2. Equipment (Schedule D-2):					
b. Road Machinery, Farm & Other Working Equipment					
c. Office Machines, Furniture, Fixtures & Equipment					
d. IS Equipment (Data Processing & Telecommunications)					
e. Equipment - Lease Purchase					
f. Other Equipment					
Total Equipment (Schedule D-2)					
3. Vehicles (Schedule D-3)					
4. Wireless Comm. Devices (Schedule D-4)					
E. SUBSIDIES, LOANS & GRANTS (Schedule E):	50,000	50,000	50,000		
TOTAL EXPENDITURES	50,000	50,000	50,000		
II. BUDGET TO BE FUNDED AS FOLLOWS:					
Cash Balance-Unencumbered					
General Fund Appropriation (Enter General Fund Lapse Below)	50,000	50,000	50,000		
State Support Special Funds					
Federal Funds _____ Other Special Funds (Specify) _____					
Less: Estimated Cash Available Next Fiscal Period					
TOTAL FUNDS (equals Total Expenditures above)	50,000	50,000	50,000		
GENERAL FUND LAPSE					
III. PERSONNEL DATA					
Positions Authorized in Appropriation Bill					
Permanent: Full Time:					
Part Time:					
Time-Limited: Full Time:					
Part Time:					
Average Annual Vacancy Rate (Percentage)					
Permanent: Full Time:					
Part Time:					
Time-Limited: Full Time:					
Part Time:					

Approved by: Board of trustees, MDAH
 Official of Board or Commission

Budget Officer: Robert N. T. Benson / rbenson@mdah.state.ms.us

Phone Number: 601-576-6850

Submitted by: h t homes
 Name

Title: Director

Date: August 4, 2014

REPORT BY FUNDING SOURCE

Name of Agency MDAH/Statewide Oral History

Specify Funding Sources As Shown Below	FY 2014 Actual Amount	% Of Line Item	% Of Total Budget	FY 2015 Estimated Amount	% Of Line Item	% Of Total Budget	FY 2016 Requested Amount	% Of Line Item	% Of Total Budget
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal _____ Other Special (Specify) _____									
10.									
11.									
12.									
13.									
Total Salaries									
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal _____ Other Special (Specify) _____									
10.									
11.									
12.									
13.									
Total Travel									
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal _____ Other Special (Specify) _____									
10.									
11.									
12.									
13.									
Total Contractual									
1. General _____ State Support Special (Specify) _____									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal _____ Other Special (Specify) _____									
10.									
11.									
12.									
13.									
Total Commodities									

REPORT BY FUNDING SOURCE

Name of Agency MDAH/Statewide Oral History

Specify Funding Sources As Shown Below	FY 2014 Actual Amount	% Of Line Item	% Of Total Budget	FY 2015 Estimated Amount	% Of Line Item	% Of Total Budget	FY 2016 Requested Amount	% Of Line Item	% Of Total Budget
1. General State Support Special (Specify)									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal Other Special (Specify)									
10.									
11.									
12.									
13.									
Total Other Than Equipment									
1. General State Support Special (Specify)									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal Other Special (Specify)									
10.									
11.									
12.									
13.									
Total Equipment									
1. General State Support Special (Specify)									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal Other Special (Specify)									
10.									
11.									
12.									
13.									
Total Vehicles									
1. General State Support Special (Specify)									
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal Other Special (Specify)									
10.									
11.									
12.									
13.									
Total Wireless Comm. Devices									

REQUEST BY FUNDING SOURCE

Name of Agency MDAH/Statewide Oral History

Specify Funding Sources As Shown Below	FY 2014 Actual Amount	% Of Line Item	% Of Total Budget	FY 2015 Estimated Amount	% Of Line Item	% Of Total Budget	FY 2016 Requested Amount	% Of Line Item	% Of Total Budget
1. General State Support Special (Specify)	50,000	100.00%		50,000	100.00%		50,000	100.00%	
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal Other Special (Specify)									
10.									
11.									
12.									
13.									
Total Subsidies, Loans & Grants	50,000		100.00%	50,000		100.00%	50,000		100.00%
1. General State Support Special (Specify)	50,000	100.00%		50,000	100.00%		50,000	100.00%	
2. Budget Contingency Fund									
3. Education Enhancement Fund									
4. Health Care Expendable Fund									
5. Tobacco Control Fund									
6. Hurricane Disaster Reserve Fund									
7. Capital Expense Fund									
8.									
9. Federal Other Special (Specify)									
10.									
11.									
12.									
13.									
TOTAL	50,000		100.00%	50,000		100.00%	50,000		100.00%

SPECIAL FUNDS DETAIL

MDAH/Statewide Oral History
Name of Agency

S. STATE SUPPORT SPECIAL FUNDS		(1) Actual Revenues FY 2014	(2) Estimated Revenues FY 2015	(3) Requested Revenues FY 2016
Source (Fund Number)	Detailed Description of Source			
	Cash Balance-Unencumbered			
Budget Contingency Fund	BCF - Budget Contingency Fund			
Education Enhancement Fund	EEF - Education Enhancement Fund			
Health Care Expendable Fund	HCEF - Health Care Expendable Fund			
Tobacco Control Fund	TCF - Tobacco Control Fund			
Hurricane Disaster Reserve Fund	HDRF - Hurricane Disaster Reserve Fund			
Capital Expense Fund	CEF - Capital Expense Fund			
Section S TOTAL				

A. FEDERAL FUNDS*		Percentage Match Requirement		(1) Actual Revenues FY 2014	(2) Estimated Revenues FY 2015	(3) Requested Revenues FY 2016
Source (Fund Number)	Detailed Description of Source	FY 2015	FY 2016			
	Cash Balance-Unencumbered					
Section A TOTAL						

B. OTHER SPECIAL FUNDS (NON-FED'L)		(1) Actual Revenues FY 2014	(2) Estimated Revenues FY 2015	(3) Requested Revenues FY 2016
Source (Fund Number)	Detailed Description of Source			
	Cash Balance-Unencumbered			
Section B TOTAL				

Section S + A + B TOTAL				
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C. TREASURY FUND/BANK ACCOUNTS*			(1) Reconciled Balance as of 6/30/14	(2) Balance as of 6/30/15	(3) Balance as of 6/30/16
Name of Fund/Account	Fund/Account Number	Name of Bank (If Applicable)			

* Any non-federal funds that have restricted uses must be identified and narrative of restrictions attached.

**NARRATIVE OF SPECIAL FUNDS DETAIL
AND TREASURY FUND/BANK ACCOUNTS**

MDAH/Statewide Oral History

Name of Agency

CONTINUATION AND EXPANDED REQUEST

MDAH/Statewide Oral History _____

Program No. _____ of _____ I. Programs

AGENCY

SUMMARY OF ALL PROGRAMS

PROGRAM

	FY 2014 Actual				
	(1) General	(2) State Support Special	(3) Federal	(4) Other Special	(5) Total
Salaries, Wages, Fringe					
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Comm. Devs.					
Subsidies, Loans & Grants	50,000				50,000
Total	50,000				50,000
No. of Positions (FTE)					

	FY 2015 Estimate				
	(6) General	(7) State Support Special	(8) Federal	(9) Other Special	(10) Total
Salaries, Wages, Fringe					
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Comm. Devs.					
Subsidies, Loans & Grants	50,000				50,000
Total	50,000				50,000
No. of Positions (FTE)					

	FY 2016 Increase/Decrease for Continuation				
	(11) General	(12) State Support Special	(13) Federal	(14) Other Special	(15) Total
Salaries, Wages, Fringe					
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Comm. Devs.					
Subsidies, Loans & Grants					
Total					
No. of Positions (FTE)					

Note: FY2016 Total Request = FY2015 Estimated + FY2016 Incr(Decr) for Continuation + FY2016 Expansion/Reduction of Existing Activities + FY2016 New Activities.

CONTINUATION AND EXPANDED REQUEST

MDAH/Statewide Oral History
AGENCY

Program No. _____ of 1 Programs

SUMMARY OF ALL PROGRAMS

PROGRAM

FY 2016 Expansion/Reduction of Existing Activities				
(16) General	(17) State Support Special	(18) Federal	(19) Other Special	(20) Total
Salaries, Wages, Fringe				
Travel				
Contractual Services				
Commodities				
Other Than Equipment				
Equipment				
Vehicles				
Wireless Comm. Devs.				
Subsidies, Loans & Grants				
Total				
No. of Positions (FTE)				

FY 2016 New Activities				
(21) General	(22) State Support Special	(23) Federal	(24) Other Special	(25) Total
Salaries, Wages, Fringe				
Travel				
Contractual Services				
Commodities				
Other Than Equipment				
Equipment				
Vehicles				
Wireless Comm. Devs.				
Subsidies, Loans & Grants				
Total				
No. of Positions (FTE)				

FY 2016 Total Request				
(26) General	(27) State Support Special	(28) Federal	(29) Other Special	(30) Total
Salaries, Wages, Fringe				
Travel				
Contractual Services				
Commodities				
Other Than Equipment				
Equipment				
Vehicles				
Wireless Comm. Devs.				
Subsidies, Loans & Grants	50,000			50,000
Total	50,000			50,000
No. of Positions (FTE)				

Note: FY2016 Total Request = FY2015 Estimated + FY2016 Incr(Decr) for Continuation + FY2016 Expansion/Reduction of Existing Activities + FY2016 New Activities.

**SUMMARY OF PROGRAMS
FORM MBR-1-03sum**

MDAH/Statewide Oral History _____
Agency Name

FUNDING REQUESTED FISCAL YEAR 2016

PROGRAM	GENERAL	ST.SUPP.SPECIAL	FEDERAL	OTHER SPECIAL	TOTAL
1. STATEWIDE ORAL HISTORY	50,000				50,000
SUMMARY OF ALL PROGRAMS	50,000				50,000

CONTINUATION AND EXPANDED REQUEST

MDAH/Statewide Oral History _____

Program No. 1 of 1 Programs

AGENCY

STATEWIDE ORAL HISTORY

PROGRAM

	FY 2014 Actual				
	(1) General	(2) State Support Special	(3) Federal	(4) Other Special	(5) Total
Salaries, Wages, Fringe					
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Comm. Devs.					
Subsidies, Loans & Grants	50,000				50,000
Total	50,000				50,000
No. of Positions (FTE)					

	FY 2015 Estimate				
	(6) General	(7) State Support Special	(8) Federal	(9) Other Special	(10) Total
Salaries, Wages, Fringe					
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Comm. Devs.					
Subsidies, Loans & Grants	50,000				50,000
Total	50,000				50,000
No. of Positions (FTE)					

	FY 2016 Increase/Decrease for Continuation				
	(11) General	(12) State Support Special	(13) Federal	(14) Other Special	(15) Total
Salaries, Wages, Fringe					
Travel					
Contractual Services					
Commodities					
Other Than Equipment					
Equipment					
Vehicles					
Wireless Comm. Devs.					
Subsidies, Loans & Grants					
Total					
No. of Positions (FTE)					

Note: FY2016 Total Request = FY2015 Estimated + FY2016 Incr(Decr) for Continuation + FY2016 Expansion/Reduction of Existing Activities + FY2016 New Activities.

CONTINUATION AND EXPANDED REQUEST

MDAH/Statewide Oral History
AGENCY

Program No. 1 of 1 Programs

STATEWIDE ORAL HISTORY

PROGRAM

FY 2016 Expansion/Reduction of Existing Activities				
(16) General	(17) State Support Special	(18) Federal	(19) Other Special	(20) Total
Salaries, Wages, Fringe				
Travel				
Contractual Services				
Commodities				
Other Than Equipment				
Equipment				
Vehicles				
Wireless Comm. Devs.				
Subsidies, Loans & Grants				
Total				
No. of Positions (FTE)				

FY 2016 New Activities				
(21) General	(22) State Support Special	(23) Federal	(24) Other Special	(25) Total
Salaries, Wages, Fringe				
Travel				
Contractual Services				
Commodities				
Other Than Equipment				
Equipment				
Vehicles				
Wireless Comm. Devs.				
Subsidies, Loans & Grants				
Total				
No. of Positions (FTE)				

FY 2016 Total Request				
(26) General	(27) State Support Special	(28) Federal	(29) Other Special	(30) Total
Salaries, Wages, Fringe				
Travel				
Contractual Services				
Commodities				
Other Than Equipment				
Equipment				
Vehicles				
Wireless Comm. Devs.				
Subsidies, Loans & Grants	50,000			50,000
Total	50,000			50,000
No. of Positions (FTE)				

Note: FY2016 Total Request = FY2015 Estimated + FY2016 Incr(Decr) for Continuation + FY2016 Expansion/Reduction of Existing Activities + FY2016 New Activities.

PROGRAM DECISION UNITS

MDAH/Statewide Oral History

1 - STATEWIDE ORAL HISTORY

AGENCY

PROGRAM NAME

	A	B	C	D	E	F	G	H
EXPENDITURES:	FY 2015 Appropriation	Escalations By DFA	Non-Recurring Items	Total Funding Change	FY 2016 Total Request			
SALARIES								
GENERAL								
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
TRAVEL								
GENERAL								
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
CONTRACTUAL								
GENERAL								
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
COMMODITIES								
GENERAL								
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
CAPITAL-OTE								
GENERAL								
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
EQUIPMENT								
GENERAL								
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
VEHICLES								
GENERAL								
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
WIRELESS DEV								
GENERAL								
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
SUBSIDIES	50,000				50,000			
GENERAL	50,000				50,000			
ST.SUP.SPECIAL								
FEDERAL								
OTHER								
TOTAL	50,000				50,000			

FUNDING:

GENERAL FUNDS	50,000				50,000			
ST.SUP.SPCL.FUNDS								
FEDERAL FUNDS								
OTHER SP.FUNDS								
TOTAL	50,000				50,000			

POSITIONS:

GENERAL FTE								
ST.SUP.SPCL.FTE								
FEDERAL FTE								
OTHER SP FTE								
TOTAL FTE								

PRIORITY LEVEL:

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PROGRAM NARRATIVE

Program Data Collected in Accordance with the
Mississippi Performance Budget and Strategic Planning Act of 1994
(To Accompany Form MBR-1-03)

MDAH/Statewide Oral History

1 - STATEWIDE ORAL HISTORY

AGENCY NAME

PROGRAM NAME

I. Program Description:

Funds provided will continue and expand the program of oral history interviews with citizens of the state. These funds are granted to the Mississippi Humanities Council, which provides additional funding for interviews. Working with the Center for Oral History and Cultural Heritage, University of Southern Mississippi, the Humanities Council awards grants to local groups across the state to support oral history interviewing projects.

II. Program Objective:

To generate a body of primary source materials based on oral history interviews with Mississippians.

PROGRAM PERFORMANCE INDICATORS AND MEASURES
 Program Data Collected in Accordance with the Mississippi Performance Budget and Strategic
 Planning Act of 1994

MDAH/Statewide Oral History
 AGENCY NAME

1 - STATEWIDE ORAL HISTORY
 PROGRAM NAME

PROGRAM OUTPUTS: (This is the measure of the process necessary to carry out the goals and objectives of this program. This is the volume produced, i.e., how many people served, how many documents generated.)

	<u>FY 2014</u> <u>ACTUAL</u>	<u>FY 2015</u> <u>ESTIMATED</u>	<u>FY 2016</u> <u>PROJECTED</u>
1	0.00	0.00	0.00
2	0.00	0.00	0.00
3	0.00	0.00	0.00

PROGRAM EFFICIENCIES: (This is the measure of the cost, unit cost or productivity associated with a given outcome or output. This measure indicates linkage between services and funding, i.e., cost per investigation, cost per student or number of days to complete investigation.)

	<u>FY 2014</u> <u>ACTUAL</u>	<u>FY 2015</u> <u>ESTIMATED</u>	<u>FY 2016</u> <u>PROJECTED</u>
1	0.00	0.00	0.00
2	0.00	0.00	0.00
3	0.00	0.00	0.00

PROGRAM OUTCOMES: (This is the measure of the quality or effectiveness of the services provided by this program. This measure provides an assessment of the actual impact or public benefit of your agency's actions. This is the results produced, i.e., increased customer satisfaction by x% within a 12-month period, reduce the number of traffic fatalities due to drunk drivers within a 12-month period.)

	<u>FY 2014</u> <u>ACTUAL</u>	<u>FY 2015</u> <u>ESTIMATED</u>	<u>FY 2016</u> <u>PROJECTED</u>
1	0.00	0.00	0.00
2	0.00	0.00	0.00
3	0.00	0.00	0.00

PROGRAM 3% GENERAL FUND REDUCTION AND NARRATIVE EXPLANATION

MDAH/Statewide Oral History

	Fiscal Year 2015 Funding			FY 2015 GF PERCENT REDUCED
	Total Funds	Reduced Amount	Reduced Funding Amount	
Program Name: (1) STATEWIDE ORAL HISTORY				
GENERAL	50,000	(1,500)	48,500	(3.00%)
ST.SUPPORT SPECIAL				
FEDERAL				
OTHER SPECIAL				
TOTAL	50,000	(1,500)	48,500	
Narrative Explanation: A reduction of 3% would reduce funds granted to fund the Statewide Oral History Program.				
SUMMARY OF ALL PROGRAMS				
GENERAL	50,000	(1,500)	48,500	(3.00%)
ST.SUPPORT SPECIAL				
FEDERAL				
OTHER SPECIAL				
TOTAL	50,000	(1,500)	48,500	

MDAH BOARD OF TRUSTEES MEMBERS

MDAH/Statewide Oral History

Agency

A. Explain Rate and manner in which board members are reimbursed:

Generally, the members of the Board of Trustees have received no compensation, however under Section 39-5-3 of the MS Code, the Board members may receive compensation for the amount of their actual expenses incurred in attending board meetings.

B. Estimated number of meetings FY2015

Four (4) plus special meetings as needed.

C.	Names of Members	City, Town, Residence	Appointed By	Date of Appointment	Length of Term
1.	<u>Kane Ditto, President</u>	<u>Jackson, MS</u>	<u>See Section 39-5-3</u>	<u>01/01/2014</u>	<u>6 years</u>
2.	<u>Reuben Anderson</u>	<u>Jackson, MS</u>	<u>See Section 39-5-3</u>	<u>01/01/2010</u>	<u>6 years</u>
3.	<u>Nancy Carpenter</u>	<u>Columbus, MS</u>	<u>See Section 39-5-3</u>	<u>01/01/2014</u>	<u>6 years</u>
4.	<u>E. Jack Garner</u>	<u>Jackson, MS</u>	<u>See Section 39-5-3</u>	<u>01/01/2012</u>	<u>6 years</u>
5.	<u>Valencia Hall</u>	<u>Natchez, MS</u>	<u>See Section 39-5-3</u>	<u>10/01/2014</u>	<u>6 years</u>
6.	<u>Betsey Hamilton</u>	<u>New Albany, MS</u>	<u>See Section 39-5-3</u>	<u>01/01/2013</u>	<u>3 years</u>
7.	<u>Web Heidelberg</u>	<u>Hattiesburg, MS</u>	<u>See Section 39-5-3</u>	<u>01/01/2012</u>	<u>6 years</u>
8.	<u>Hilda Povall</u>	<u>Cleveland, MS</u>	<u>See Section 39-5-3</u>	<u>01/01/2012</u>	<u>6 years</u>
9.	<u>Roland Weeks</u>	<u>Biloxi, MS</u>	<u>See Section 39-5-3</u>	<u>01/01/2010</u>	<u>6 years</u>

Identify Statutory Authority (Code Section or Executive Order Number)*

Chapter 3, Section 39-5.1 – 39-5.23, Laws of Mississippi, MS Code 1972

*If Executive Order, please attach copy.

**SCHEDULE B
CONTRACTUAL SERVICES**

MDAH/Statewide Oral History

Name of Agency

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2014	(2) Estimated Expenses FY Ending June 30, 2015	(3) Requested for FY Ending June 30, 2016
A. TUITION, REWARDS & AWARDS (61010-61099)			
61010 Tuition			
61020 Employee Training			
61030 Travel Related Registration			
TOTAL (A)			
B. TRANSPORTATION & UTILITIES (61100-61299)			
61110 Postage, Box Rent, etc.			
611XX Transportation of Goods (61180-61190)			
61210 Electricity			
61220 Gas			
61230 Water & Sewage			
TOTAL (B)			
C. PUBLIC INFORMATION (61300-61399)			
61310 Advertising & Public Information			
61340 Signs & Billboards			
61350 Exhibits & Displays			
TOTAL (C)			
D. RENTS (61400-61499)			
61420 Building & Floor Space			
61430 Land			
61440 Office Equipment			
61460 Other Equipment			
61470 Capitol Facilities - Rental			
61480 Exhibits, Displays & Conference Rooms			
61490 Other Rentals			
TOTAL (D)			
E. REPAIRS & SERVICES (61500-61599)			
61500 Grounds, Walks, Fences & Lots			
61520 Buildings			
61530 Machinery & Field Equipment			
61540 Motor Vehicles			
61550 Office Equipment & Furniture			
61580 Shop Equipment			
61590 Miscellaneous Items of Equipment			
TOTAL (E)			
F. FEES, PROFESSIONAL & OTHER SERVICES (61600-61699)			
61610 Engineering			
61615 SAAS Fees - DFA			
61616 MMRS Fees			
61620 Department of Audit			
6162X Accounting (61621-61624)			
6163X Legal (61630-61636)			
6164X Medical Services (61640-61646)			
61650 State Personnel Board			
6165X Personnel Services Contracts (61651-61653)			
61658 Personnel Services Contracts - SPAHRS			
6166X Court Costs & Reporters (61659-61660)			
61670 Laboratory & Testing Fees			

**SCHEDULE B
CONTRACTUAL SERVICES CONTINUED**

MDAH/Statewide Oral History

Name of Agency

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2014	(2) Estimated Expenses FY Ending June 30, 2015	(3) Requested for FY Ending June 30, 2016
F. FEES, PROFESSIONAL & OTHER SERVICES (61600-61699)			
6168X Contract Worker (61682-61688)			
61690 Other Fees & Services			
TOTAL (F)			
G. OTHER CONTRACTUAL SERVICES (61700-61899)			
61700 Liability Insurance Pool Contributions (Tort Claims)			
61710 Insurance & Fidelity Bonds			
61715 Insurance Computer Equipment			
61718 Service Charge - Bank Accounts			
61720 Membership Dues			
61721 Subscriptions			
61730 Laundry, Dry Cleaning & Towel Service			
61740 Salvage, Demolition & Removal Service			
61800 Procurement Card/Contractual Purchases			
TOTAL (G)			
H. INFORMATION TECHNOLOGY (61900-61990)			
61902 IT Professional Fees - Outside Vendor			
61905 IT Professional Fees - ITS			
6191X IS Training/Education			
61917 Service Charges to State Data Center			
61921 Software Acquisition, Installation and Maintenance			
61922 Basic Telephone Monthly - Outside Vendor			
61923 Basic Telephone Monthly - ITS			
61924 Long Distance Charges - Outside Vendor			
61925 Long Distance Charges - ITS			
61926 Private Data Line Monthly Charges - Outside Vendor			
61927 Private Data Line Monthly Charges - ITS			
61928 Private Network Access Charges - Outside Vendor			
61929 Public Network Access Charges - ITS			
61932 Rental of IT Equipment - Outside Vendor			
61938 Pager Usage Time - Outside Vendor			
61939 Cellular Usage Time - Outside Vendor			
61940 Wireless Data Usage (Non-Cellular)			
61941 Satellite Voice Service			
61942 IT Offsite Storage - Data or Software			
61961 Maintenance/Repair of IS Equipment - Outside Vendor			
TOTAL (H)			
I. OTHER (61991-61999)			
6199X Prior Year Expense (61996-61998)			
61999 Contractual Services - No PO Required			
TOTAL (I)			

**SCHEDULE B
CONTRACTUAL SERVICES CONTINUED**

MDAH/Statewide Oral History _____

Name of Agency

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2014	(2) Estimated Expenses FY Ending June 30, 2015	(3) Requested for FY Ending June 30, 2016
GRAND TOTAL <i>(Enter on Line 1-B of Form MBR-1)</i>			
FUNDING SUMMARY:			
GENERAL FUNDS			
STATE SUPPORT SPECIAL FUNDS			
FEDERAL FUNDS			
OTHER SPECIAL FUNDS			
TOTAL FUNDS			

**SCHEDULE C
COMMODITIES**

MDAH/Statewide Oral History
Name of Agency _____

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2014	(2) Estimated Expenses FY Ending June 30, 2015	(3) Requested for FY Ending June 30, 2016
A. MAINTENANCE & CONSTR. MATERIALS & SUPPLIES (62010-62099)			
62040 Lumber Parts			
62050 Steel & Other Metals			
62060 Paints			
Total (A)			
B. PRINTING & OFFICE SUPPLIES & MATERIALS (62100-62199)			
62110 Printing Binding			
62120 Duplication & Reproduction Supplies			
62130 Office Supplies & Materials			
62140 Paper Supplies			
62150 Maps, Manuals, Library Books			
62160 Office Equipment (not capital outlay)			
Total (B)			
C. EQUIPMENT REPAIR PARTS, SUPPLIES & ACCES. (62200-62299)			
62210 Fuels - Gasoline			
62251 Expendable Vehicle Repairs and Parts			
62270 Radio & TV Supply & Repair			
62290 Other Equipment Repair Parts			
Total (C)			
D. PROFESSIONAL & SCI. SUPPLIES AND MATERIALS (62300-62399)			
62330 Photographic Supplies			
62340 Drugs & Chemicals - Medical & Lab Use			
62390 Other Professional Scientific			
Total (D)			
E. OTHER SUPPLIES & MATERIALS (62400-62999)			
62420 Hardware, Plumbing & Electrical			
62450 Janitor Supplies & Cleaning			
62460 Wearing Material			
6247X Foods			
62520 Decal Signs			
62530 Uniforms & Wearing Apparel			
62555 IS Equipment Repair Parts			
62560 Eating Utensils and Cafeteria Supplies			
62590 Other Supplies & Materials			
62595 Other Equipment - Comp			
62800 Procurement Card/Commodity Purchases			
62994 Petty Cash Expense			
62998 Prior Year Expenses			
Total (E)			

**SCHEDULE C
COMMODITIES CONTINUED**

MDAH/Statewide Oral History
Name of Agency _____

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2014	(2) Estimated Expenses FY Ending June 30, 2015	(3) Requested for FY Ending June 30, 2016
GRAND TOTAL (A, B, C, D & E) <i>(Enter on Line I-C of Form MBR-1)</i>			
FUNDING SUMMARY:			
GENERAL FUNDS			
STATE SUPPORT SPECIAL FUNDS			
FEDERAL FUNDS			
OTHER SPECIAL FUNDS			
TOTAL FUNDS			

**SCHEDULE D-1
CAPITAL OUTLAY
OTHER THAN EQUIPMENT**

MDAH/Statewide Oral History
Name of Agency _____

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2014	(2) Estimated Expenses FY Ending June 30, 2015	(3) Requested for FY Ending June 30, 2016
A. LANDS (63100-63199)			
63110 Land for Buildings			
63120 Land for Right-of-Way			
63170 Land Purchased for Other Purposes			
TOTAL (A)			
B. BUILDINGS & IMPROVEMENTS (63200-63299)			
63230 Building Additions & Betterments (except MDOT)			
63250 Buildings - Purchased, Constructed, Remodeled			
TOTAL (B)			
C. INFRASTRUCTURE & OTHER (63500-63999)			
635XX Other			
TOTAL (C)			
GRAND TOTAL <i>(Enter on Line I-D-1 of Form MBR-1)</i>			
FUNDING SUMMARY:			
GENERAL FUNDS			
STATE SUPPORT SPECIAL FUNDS			
FEDERAL FUNDS			
OTHER SPECIAL FUNDS			
TOTAL FUNDS			

**SCHEDULE D-2
CAPITAL OUTLAY EQUIPMENT**

MDAH/Statewide Oral History

Name of Agency _____

EQUIPMENT BY ITEM	Act. FY Ending June 30, 2014		Est. FY Ending June 30, 2015		Req. FY Ending June 30, 2016		
	No. of Units	Total Cost	No. of Units	Total Cost	No. of Units	Cost Per Unit	Total Cost
A. VEHICLES (see form MBR-1-D-3)							
B. ROAD MACHINERY, FARM & OTHER EQUIPMENT							
63320 Road Machinery							
TOTAL (B)							
C. OFFICE MACHINES, FURNITURE, FIXTURES, EQUIP.							
63330 Office Equipment, Furniture							
TOTAL (C)							
D. IS EQUIPMENT (DP & TELECOMMUNICATIONS)							
63421 IT/IS Equipment							
TOTAL (D)							
E. EQUIPMENT - LEASE PURCHASE (63460-63476)							
63460 Lease-Purchase - Copy Machines							
63462 Lease-Purchase - Information Systems Equipment							
63476 Lease-Purchase - Other Equipment							
TOTAL (E)							
F. OTHER EQUIPMENT							
63396 Betterments/Accessrs for Vehicles							
63405 Lawn and Garden Equipment							
63490 Other Equipment							
63495 Betterments/Accessrs for Other than Vehicles							
TOTAL (F)							
GRAND TOTAL <i>(Enter on Line I-D-2 of Form MBR-1)</i>							
FUNDING SUMMARY:							
GENERAL FUNDS							
STATE SUPPORT SPECIAL FUNDS							
FEDERAL FUNDS							
OTHER SPECIAL FUNDS							
TOTAL FUNDS							

**SCHEDULE D-3
PASSENGER/WORK VEHICLES**

MDAH/Statewide Oral History

Name of Agency _____

MINOR OBJECT OF EXPENDITURE	Vehicle Inventory	FY Ending	June 30, 2014	FY Ending	June 30, 2015	FY Ending	June 30, 2016
	June 30, 2014	No. of Vehicles	Actual Cost	No. of Vehicles	Estimated Cost	No. of Vehicles	Requested Cost
A. PASSENGER & WORK VEHICLES (63310, 63390-63400)							
63310 Passenger, Basic Economy							
63310 Passenger, Basic Sporty							
63310 Passenger, Entry Level							
63310 Passenger, Lower Middle							
63310 Passenger, Traditional Large							
63310 Passenger, Upper Middle							
63310 Passenger, Upper Middle Specialty							
63390 Truck, Compact Pickup							
63390 Truck, Fullsize Pickup							
63390 Truck, Fullsize Utility							
63390 Truck, Midsize Pickup							
63391 Truck, Heavy Duty Station Wagon							
63391 Truck, Heavy Duty Trucks							
63392 Truck, Mini Sport Utility							
63392 Truck, Sport Utility							
63393 Truck, Fullsize Van (Cargo)							
63393 Truck, Minivan (Cargo)							
63393 Truck, Minivan (Passenger)							
63393 Truck, Window Van (Passenger)							
63400 Other Vehicles							
TOTAL (A)							
B. BETTERMENTS OR ACCESSORIES FOR VEHICLES (63395)							
63395 Betterments or Accessories for Vehicles							
TOTAL (B)							
GRAND TOTAL <i>(Enter on Line I-D-3 of Form MBR-1)</i>							
FUNDING SUMMARY:							
GENERAL FUNDS							
STATE SUPPORT SPECIAL FUNDS							
FEDERAL FUNDS							
OTHER SPECIAL FUNDS							
TOTAL FUNDS							

**SCHEDULE D-4
WIRELESS COMMUNICATION DEVICES**

MDAH/Statewide Oral History
Name of Agency _____

MINOR OBJECT OF EXPENDITURE	Device Inventory	Act FY Ending June 30, 2014		Est FY Ending June 30, 2015		Req FY Ending June 30, 2016	
	June 30, 2014	No. of Devices	Actual Cost	No. of Devices	Estimated Cost	No. of Devices	Requested Cost
A. CELLULAR PHONES (63435)							
63435 Cellular Phones							
Total (A)							
B. PAGERS (63434)							
63434 Pagers, Paging Equipment							
Total (B)							
C. WIRELESS PERSONAL DIGITAL ASSISTANTS (63435)							
63435 Wireless PDAs, Blackberry, etc							
Total (C)							
GRAND TOTAL <i>(Enter on Line I-D-4 of Form MBR-1)</i>							
FUNDING SUMMARY:							
GENERAL FUNDS							
STATE SUPPORT SPECIAL FUNDS							
FEDERAL FUNDS							
OTHER SPECIAL FUNDS							
TOTAL FUNDS							

**SCHEDULE E
SUBSIDIES, LOANS & GRANT**

MDAH/Statewide Oral History

Name of Agency

MINOR OBJECT OF EXPENDITURE	(1) Actual Expenses FY Ending June 30, 2014	(2) Estimated Expenses FY Ending June 30, 2015	(3) Requested for FY Ending June 30, 2016
A. SCHOOL GRANTS TO COUNTIES & MUNICIPALITIES (64000-64599)			
TOTAL (A)			
B. GRANTS TO I.H.L. & OTHER POLITICAL SUBDIVISIONS (64600-64699)			
TOTAL (B)			
C. GRANTS TO NON-GOVERNMENT INSTNS & INDS (64700-64999)			
64790 Grants to Non-Governmental Institutions	50,000	50,000	50,000
TOTAL (C)	50,000	50,000	50,000
D. DEBT SERVICE & JUDGEMENTS (65000-65399)			
65040 Interest on Lease Purchases			
6504x Other Indebtedness			
TOTAL (D)			
E. OTHER (66000-89999)			
TOTAL (E)			
GRAND TOTAL <i>(Enter on Line I-E of Form MBR-1)</i>	50,000	50,000	50,000
FUNDING SUMMARY:			
GENERAL FUNDS	50,000	50,000	50,000
STATE SUPPORT SPECIAL FUNDS			
FEDERAL FUNDS			
OTHER SPECIAL FUNDS			
TOTAL FUNDS	50,000	50,000	50,000

NARRATIVE
2016 BUDGET REQUEST

MDAH/Statewide Oral History _____
Name of Agency

We are requesting general funds in the amount of \$50,000 in the category of Subsidies, Loans and Grants to continue this program in FY2015.

FEES, PROFESSIONAL AND OTHER SERVICES
(EXPENDITURE CODES 61600-61699)

MDAH/Statewide Oral History

Name of Agency

TYPE OF FEE AND NAME OF VENDOR	Retired w/ PERS	(1) Actual Expenses FY Ending June 30, 2014	(2) Estimated Expenses FY Ending June 30, 2015	(3) Requested for FY Ending June 30, 2016	Fund Num.
61610 Engineering					
TOTAL 61610 Engineering					
61615 SAAS Fees - DFA					
TOTAL 61615 SAAS Fees - DFA					
61616 MMRS Fees					
TOTAL 61616 MMRS Fees					
61620 Department of Audit					
TOTAL 61620 Department of Audit					
6162X Accounting (61621-61624)					
TOTAL 6162X Accounting (61621-61624)					
6163X Legal (61630-61636)					
TOTAL 6163X Legal (61630-61636)					
6164X Medical Services (61640-61646)					
TOTAL 6164X Medical Services (61640-61646)					
61650 State Personnel Board					
TOTAL 61650 State Personnel Board					
6165X Personnel Services Contracts (61651-61653)					
TOTAL 6165X Personnel Services Contracts (61651-61653)					
61658 Personnel Services Contracts - SPAHRS					
TOTAL 61658 Personnel Services Contracts - SPAHRS					
6166X Court Costs & Reporters (61659-61660)					
TOTAL 6166X Court Costs & Reporters (61659-61660)					
61670 Laboratory & Testing Fees					
TOTAL 61670 Laboratory & Testing Fees					
6168X Contract Worker (61682-61688)					
TOTAL 6168X Contract Worker (61682-61688)					
61690 Other Fees & Services					
TOTAL 61690 Other Fees & Services					
GRAND TOTAL (61600-61699)					

VEHICLE PURCHASE DETAILS

MDAH/Statewide Oral History _____

Name of Agency

Year	Model	Person(s) Assigned To	Vehicle Purpose/Use	Replacement or New?	FY2016 Req. Cost
				New	0
					<hr/>
					0
TOTAL VEHICLE REQUEST					0

**VEHICLE INVENTORY
AS OF JUNE 30, 2014**

MDAH/Statewide Oral History _____

Name of Agency

Veh. Type	Vehicle Descript.	Model Year	Model	Person(s) Assigned To	Purpose/Use	Tag Number	Mileage On 6-30-14	Average Miles per Year	Replacement Proposed	
									FY 2015	FY 2016

Vehicle Type = Passenger/Work

CAPITAL LEASES

MDAH/Statewide Oral History
 Name of Agency

Vendor/ Item Leased	Original Date of Lease	Original Number of Months of Lease	Number of Months Remaining on 6-30-14	Last Payment Date	Interest Rate	Amount of Each Payment			Total of Payments to be Made						
									Principal	Interest	Total	Actual FY 2014	Estimated FY 2015		
						Principal	Interest	Total					Principal	Interest	Total
/	//	0	0	//	.000										

Summary of 3% General Fund Program Reduction to FY2015 Appropriated Funding by Major Object

MDAH/Statewide Oral History _____

Major Object	FY2015 GENERAL FUND REDUCTION	EFFECT ON FY2015 STATE SUPPORT SPECIAL FUNDS	EFFECT ON FY2015 FEDERAL FUNDS	EFFECT ON FY2015 OTHER SPECIAL FUNDS	TOTAL 3% REDUCTIONS
PERSONAL SERVICES					
TRAVEL					
CONTRACTUAL SERVICES					
COMMODITIES					
OTHER THAN EQUIPMENT					
EQUIPMENT					
VEHICLES					
WIRELESS COMM. DEVICES					
SUBSIDIES, LOANS, ETC	(1,500)				(1,500)
TOTALS	(1,500)				(1,500)